



PTO/SB/31 (02-01)

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Docket Number (Optional)

INE-0044C2

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on APRIL 25, 2003

Signature

Typed or printed name

H.M. BEDINGFIELD

In re Application of

SAM LIPRIE

Application Number

09/681,303

Filed

MARCH 15, 2001

For FLEXIBLE SOURCE WIRE FOR RADIATION TREATMENT OF DISEASES

Group Art Unit

3641

Examiner

J. KEITH

16 Appeal 5/9/03 H. Bedingfield

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the examiner.

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MAY 08 2003

GROUP 3600

05/06/2003 MGBREMI 00000009 061130 09681303

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The fee for this Notice of Appeal is (37 CFR 1.17(b))

\$ 320.00

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:

\$ 160.00

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 06-1130. I have enclosed a duplicate copy of this sheet.

☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the

☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

☒ attorney or agent of record.

☒ attorney or agent acting under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). 44,530

Signature

H.M. BEDINGFIELD

Typed or printed name

4/24/03

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.